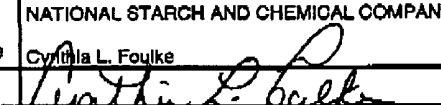


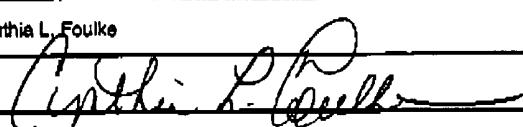
PTO/SB/21 (02-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCEUnder the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(To be used for all correspondence after initial filing)</i>		Application Number	10/026,017
		Filing Date	December 21, 2001
		First Named Inventor	Brian S. Hultman
		Art Unit	1711
		Examiner Name	Rabon A Gergant
Total Number of Pages in This Submission	17	Attorney Docket Number	1748A

ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	<input type="checkbox"/>
Remarks			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	NATIONAL STARCH AND CHEMICAL COMPANY Cynthia L. Foulke
Signature	
Date	July 15, 2004

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. 703-872-9310		
Typed or printed name	Cynthia L. Foulke	Date
Signature		Date

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)**1060-00**

Complete if Known

Application Number	10/026,017
Filing Date	12-21-2001
First Named Inventor	Brian S. Huffman
Examiner Name	Rabon A. Sargent
Art Unit	1711
Attorney Docket No.	1749A

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:

Deposit Account Number	14 - D455
Deposit Account Name	

The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051	130	2051	65 Surcharge - late filing fee or oath	
1052	50	2052	25 Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130 Non-English specification	
1812	2,520	1812	2,520 For filing a request for ex parte reexamination	
1804	920*	1804	920* Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840* Requesting publication of SIR after Examiner action	
1251	110	2251	65 Extension for reply within first month	
1252	420	2252	210 Extension for reply within second month	
1253	950	2253	475 Extension for reply within third month	950
1254	1,480	2254	740 Extension for reply within fourth month	
1255	2,010	2255	1,005 Extension for reply within fifth month	
1401	330	2401	165 Notice of Appeal	
1402	330	2402	165 Filing a brief in support of an appeal	
1403	290	2403	145 Request for oral hearing	
1451	1,510	1451	1,510 Petition to institute a public use proceeding	
1452	110	2452	55 Petition to revive - unavoidable	
1453	1,330	2453	665 Petition to revive - unintentional	
1501	1,330	2601	665 Utility issue fee (or reissue)	
1502	480	2502	240 Design issue fee	
1503	640	2503	320 Plant issue fee	
1480	130	1480	130 Petitions to the Commissioner	
1807	50	1807	50 Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180 Submission of Information Disclosure Stmt	
8021	40	8021	40 Recording each patent assignment per property (times number of properties)	
1809	770	2809	385 Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385 For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385 Request for Continued Examination (RCE)	
1802	900	1802	900 Request for expedited examination of a design application	
Other fee (specify) Terminal Disclaimer				110

SUBTOTAL (2) (\$)

**or number previously paid, if greater. For Reissues, see above

SUBTOTAL (3) (\$)**1060**

Reduced by Basic Filing Fee Paid

SUBMITTED BY	(Complete if applicable)		
Name (Print/Type)	CYNTHIA L. FOYKE	Registration No. (Attorney/Agent)	32-364 Telephone 908-685-7483
Signature	<i>Cynthia L. Foyke</i>	Date	07-15-2004

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